	DEC O	· & /	. no person	U.S. s are required to respond to a co Application Number	Patent and Tollection of int	PTO/SB/21 (09-08) Approved for use through 10/31/2008. OMB 0651-0031 Frademark Office, U.S. DEPARTMENT OF COMMERCE formation unless it displays a valid OMB control number.			
		RANSMITTAL		Filing Date	Sentembe	er 29, 2000			
FORM				First Named Inventor	Elizabeth				
FORIVI				Art Unit	3714				
				Examiner Name	Nikolai A.	Gishnock			
(to	be used for	all correspondence after initial		Attorney Docket Number					
Tot	tal Number o	f Pages in This Submission	10		5338-002-	0801			
			ENCI	LOSURES (Check al	l that apply	1)			
	Fee Transmittal Form Fee Attached				Address	After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Request for Continued Examination (RCE) with a Petition For Extension of Time (4 months)			
		SIGNA	TURE 0	F APPLICANT, ATTO	RNEY, C	OR AGENT			
Firm N	Name	Hanify and King, P.C.		<u> </u>					
Signat	ture	lande		7/2					
Printe	d name	Chadwick A. Jackson	-						
Date	Date December 5, 2008			<i>j</i>	Reg. No.	46,495			
		С	ERTIFIC	ATE OF TRANSMISS	SION/MAI	LING			
sufficie	ent postage ite shown b	e as first class mail in an en				sited with the United States Postal Service with P.O. Box 1450, Alexandria, VA 22313-1450 on			

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Typed or printed name

Date

PTO/SB/17 (10-08)

Complete if Known

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Effective on 12/08/2004.

Fees pursaant to the Consolida		Application Num	ber 09/	675,155	5,155				
FEE TRANSMITTAL				Filing Date Septer		tember 29,	ber 29, 2000		
For		First Named Inv	entor Eliz	abeth Murp	ohy				
Applicant claims small		Examiner Name Nikola		olai A. Gish	ai A. Gishnock				
		Art Unit	371	4					
TOTAL AMOUNT OF PAYN	IENT (\$	\$1,270.00		Attorney Docket	No. 533	8-002-US0	<u>1</u>		
METHOD OF PAYMENT	(check al	l that apply)							
Check Credit Card Money Order None Other (please identify):									
✓ Deposit Account De	posit Accour	nt Number: <u>50-4545</u>		Deposit Ac	count Name:_	Hanify and	d King. P.C.		
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
✓ Charge fee(s)	Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17									
WARNING: Information on this	form may be	ecome public. Credit ca	ard inf	ormation should no	t be include	d on this form	n. Provide credit card		
information and authorization of FEE CALCULATION	on PTO-2038	•							
	011 4110	EVALUATION FE							
1. BASIC FILING, SEAR	FILING			CH FEES	EXAMINA	ATION FEE	S		
Application Type		Small Entity	ee (\$	Small Entity		Small Entity			
Utility	330		540) <u>Fee (\$)</u> 270	220	<u>Fee (\$)</u> 110	1000 1 010 (0)		
Design	220		100	50	140	70	`		
Plant	220		330	165	170	85			
Reissue	330		540	270	650	325			
Provisional	220	110	0	0	0	0			
2. EXCESS CLAIM FEE		110	•	Ü	Ü	v	Small Entity		
Fee Description						Fee (\$)			
Each claim over 20 (including Reissues) 52 26 Each independent claim over 3 (including Reissues) 220 110							26 110		
Multiple dependent cla	,,			390	195				
Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claim							Dependent Claims		
20 or HP =		x=				Fee (\$)	Fee Paid (\$)		
HP = highest number of total of Indep. Claims	claims paid fo Extra Clair		Fee	Paid (\$)					
3 or HP =		x=							
HP = highest number of indepe		s paid for, if greater than	3.						
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
- 100 = / 50 = (round up to a whole number) x =									
4. OTHER FEE(S) Non-English Specification \$120 for (no small entity discount) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late 6Hing surcharge): \$405.00 for RCE Fee: \$865.00 PEOT-4-months. \$1270.00									
Other (e.g., late filing surcharge): \$405.00 for RCE Fee; \$865.00 PEOT-4-months. \$1270.00									
UBMITTED BY		4/1	7	Do alatastia - Ala					
gnature ////	NA	41		Registration No. (Attorney/Agent)	5,495		hone 202-403-2100		
ame (Print/Type) Chadwick A	A. Jackson					Date	December 2008		

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fective on 12/08/2004.

Fees pursuant of the Consolid	Application Number 09/675		,155						
FEE TR			mber 29, 20	ber 29, 2000					
Fo			beth Murphy						
	Examiner Name		ai A. Gishnock						
✓ Applicant claims small	entity status	s. See 37 CFR 1.27	7	Art Unit	3714				
TOTAL AMOUNT OF PAY	MENT (\$) \$1,270.00	,	Attorney Docke		-002-US01			
				Tatomey Books					
METHOD OF PAYMEN	Γ (check al	II that apply)					<u> </u>		
Check Credit Card Money Order None Other (please identify):									
✓ Deposit Account D	Deposit Account Deposit Account Number: 50-4545 Deposit Account Name: Hanify and King. P.C.								
For the above-identi	fied deposit	account, the Directo	or is he	reby authorized to	: (check all tha	t apply)			
✓ Charge fee(s)	indicated b	elow		Charg	e fee(s) indica	ted below, ex	cept for the filing fee		
		e(s) or underpaymer	its of fe	e(s) 🗸 Credit	any overpaym	nents			
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
FEE CALCULATION									
1. BASIC FILING, SEAF	CH, AND	EXAMINATION F	EES						
,	FILING	FEES	RCH FEES	EXAMINAT					
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	nall Entity Fee (\$)	Fees Paid (\$)		
Utility	330	165	540	270	220	110	,		
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85			
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Provisional	220	110	0	0	0	0			
2. EXCESS CLAIM FEE	:S			Ū			Small Entity		
Fee Description						Fee (\$)	Fee (\$)		
Each claim over 20 (i			>			52 220	26 110		
Each independent cla Multiple dependent c	es)			390	195				
Total Claims	Extra Clai	ms Fee (\$)	For	e Paid (\$)			ependent Claims		
- 20 or HP =	LXUA OIGI	χ χ	=	z r ala (ψ)		Fee (\$)	Fee Paid (\$)		
HP = highest number of total		or, if greater than 20.	-						
Indep. Claims	Extra Clair		<u>Fee</u>	Paid (\$)					
3 or HP = HP = highest number of inder	pendent claim		= an 3.						
3 APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
100 = / 50 = (round up to a whole number) x =									
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)									
Other (e.g., late filing surcharge): \$485.00 for RCE Fee; \$865.00 PEOT-4-months. \$1270.00									
SUBMITTED BY	1/	4/1X	7	Registration No.	C 405	Telepho	ne 202-403-2100		
	ww/	4 4	L	(Attorney/Agent) 4	0,495		cember 2008		
Name (Print/Type) Chadwick	A. Jack≰on	,	1			Date De	cember 2006		

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